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REPLY UNDER 37 CFR 1.116
EXPEDITED PROCEDURE
TECHNOLOGY CENTER 2642

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5/29/03
(NE)

Practitioner's Docket No. 1098d

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: Christie
Application No.: 09/276,042
Filed: 3/25/1999
For: SYSTEM FOR MANAGING TELECOMMUNICATIONS

Group No.: 2642
Examiner: Benny Quoc Tieu

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Assistant Commissioner for Patents
Washington, D. C. 20231

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Response to Office Action

In response to the Office Action dated March 4, 2003, please consider the following remarks.



Please type a plus sign (+) inside this box → ☒

PTO/SB/21 (08-00)

Approved for use through 10/31/2002. OMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Application Number	09/276,042
Confirmation Number	1578
Filing Date	03/25/99
First Named Inventor	Christie
Group Art Unit	2642
Examiner Name	Benny Quoc Tieu

Total Number of Pages in This Submission	3	Attorney Docket Number	1098d
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ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Response <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
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Remarks

It is believed that no fees are due in this matter. However, if it is determined that fees are due, the Commissioner is authorized to debit Deposit Account No. 21-0765 for the required fees.

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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Michael J. Setter, Reg. 37,936
Signature	
Date	4/30/03

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on this date: 4/30/03

Typed or printed name	Laura S. Mellblom		
Signature		Date	4/30/03

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